

ELDER AFFAIRS DEPARTMENT [321]

Adopted and Filed

Pursuant to the authority of Iowa Code section 231.14, the Elder Affairs Department hereby adopts amendments to Chapter 21, “Case Management Program for Frail Elders” Iowa Administrative Code.

The adopted amendments:

1. Replace the word “client” with the word “consumer” throughout the chapter;
2. Clarify the assessment, eligibility and service plan requirements for consumers;
3. Establish requirements for addressing conflicts of interest in the case management program for frail elders; and
4. Add a severability clause to the chapter.

Notice of Intended Action was published in the Iowa Administrative Bulletin on March 26, 2008, as ARC 6673B.

The public comment period on this notice ended April 16, 2008. No comments were received.

The amendments are identical to those published under Notice.

The Commission adopted these amendments during their regularly scheduled meeting on June 11, 2008.

The amendments will become effective August 6, 2008.

The following amendments are adopted.

ITEM 1. Amend **321—Chapter 21** by striking the word “client” wherever it appears and inserting the word “consumer” in lieu thereof.

ITEM 2. Amend rule 321—21.3(231) as follows:

321—21.3(231) Definitions. Words and phrases used in this chapter are as defined in 321 IAC 1 unless the context indicates otherwise. The following ~~definitions~~ definition also ~~apply~~ applies to this chapter:

“Case management program for frail elders” or “CMPFE” means case management activities that assist an elder in gaining access to needed medical, social, and other appropriate services. Case management services are provided at the direction of the elder and include:

1. A comprehensive assessment of the individual’s needs;
2. Development and implementation of a service plan to meet those needs;
3. Coordination and monitoring of service delivery;
4. Evaluation of outcomes;
5. Periodic reassessment and revision of the service plan as needed; and
6. Ongoing advocacy on behalf of the elder.

~~“Department of human services” or “DHS” means the department established in Iowa Code chapter 217.~~

ITEM 3. Rescind rule 321—21.4(231) and adopt the following **new** rule in lieu thereof:

321—21.4(231) Program administration.

21.4(1) Each AAA shall use the forms and data processing software systems specified by the department for all program requirements.

21.4(2) The department shall have complete access to all case management records maintained by the AAA.

21.4(3) Consumer-specific case management records shall be maintained by the department and the AAA as confidential information.

21.4(4) Appeals of decisions by the AAA shall follow the procedures given in 321 IAC 2.9(231).

ITEM 4. Amend rule 321—21.5(231) as follows:

321—21.5(231) Eligibility for CMPFE services.

~~**21.5(1)**~~ A person meeting all the following criteria shall be eligible for CMPFE services:

~~a~~ 1. Resides in Iowa;

~~b~~ 2. Is aged 60 or older;

~~c~~ 3. Needs two or more services;

~~d~~ 4. Does not live in, or is within 30 days of discharge from, a nursing facility as defined in Iowa Code section 135C.1(13); and

~~e~~ 5. Is in need of case management services based on a standardized assessment of needs.

~~**21.5(2)** A person who qualifies for the DHS medical assistance elderly waiver shall also be eligible for CMPFE services.~~

ITEM 5. Rescind rule 321—21.6(231) and adopt by the following **new** rule in lieu thereof:

321—21.6(231) Admission into the case management program. The date of admission into the case management program for consumers shall be the date of the assessment.

ITEM 6. Amend subrule **21.7(1)**, paragraph “c,” as follows:

c. The ~~client~~ consumer moves into a nursing facility and is expected to stay in the facility for more than ~~30~~ 90 days;

ITEM 7. Amend rule 321—21.8(231) as follows:

321—21.8(231) Organizational requirements.

~~21.8(1) To address potential conflicts of interest, each~~ Each AAA shall develop and adhere to written procedures ~~established by the department and issued under IAPI regarding the prevention and management of conflicts of interest.~~ Written procedures Such procedures shall at a minimum include:

- a. The process for delegating case management responsibilities to a case manager;
 - b. Identification of where conflicts do, or could, exist;
 - c. Procedures to eliminate or minimize those conflicts;
 - d. A process for conflict resolution with the ~~client's~~ consumer's best interest as the priority;
- ~~and~~
- ~~e. The process for documentation of conflict resolution which indicates the outcome is satisfactory to all parties.~~

~~21.8(2) Each AAA shall adhere to department requirements as issued under IAPI~~ Each AAA shall have a designated CMPFE coordinator responsible for administering and monitoring the program at the local level.

~~21.8(3) Each AAA shall implement the process established by the department for processing client appeals of CMPFE decisions, handling client complaints, and informing clients about their complaint and appeal rights.~~

~~21.8(4)~~ (3) Each AAA shall ensure that all CMPFE staff complete mandatory reporter training requirements in accordance with Iowa Code chapter 235B.

ITEM 8. Amend subrule 21.9(3) as follows:

21.9(3) Training required during employment.

a. The case manager shall attend case management orientation ~~established~~ required by the department within six months of beginning employment with an AAA.

b. All case managers shall:

(1) Receive formal training from the AAA CMPFE coordinator in completion of the CMPFE assessment tools; and

(2) Attend six hours of department-approved long-term care or aging-related training per year.

~~b c. The~~ All CMPFE coordinator coordinators shall attend case management coordinator training provided by the department within three months of beginning employment with an AAA.

~~e d. The~~ All case manager and the CMPFE coordinator coordinators shall:

(1) Receive formal training from the department's CMPFE program manager in completion of the CMPFE assessment tool tools; and

(2) Attend six hours of department-approved long-term care or aging-related training per year.

ITEM 9. Amend rule 321—21.11(231) as follows:

321—21.11(231) ~~Screening and assessment~~ *Assessment of client consumer needs.* ~~Screening and~~ The assessment of client consumer needs shall be conducted in person and shall, at a minimum, consist of:

~~21.11(1)~~ ~~Scheduling the home visit.~~

~~21.11(2)~~ (1) Obtaining the ~~client's~~ consumer's signature on a standard release of information form which documents the ~~client's~~ consumer's permission to share information for ~~screening,~~ assessment and case management.

~~21.11(3)~~ Conducting the functional abilities screening evaluation (FASE) or similar screening tool as established by the department.

~~21.11(4)~~ (2) Conducting a comprehensive assessment if: using the assessment tool designated by the department.

a. ~~The client answers one or more of the screening tool mental health questions incorrectly; or~~
b. ~~The client is unable to perform two or more of the screening tool activities of daily living(ADL) items; or~~

c. ~~Professional judgment of the person completing the screening indicates that the client is in need of further assessment regardless of the results of the screening tool; or~~

d. ~~The client has applied for the elderly waiver under the medical assistance program.~~

~~21.11(5)~~ (3) Contacting sources for additional information to complete the assessment tool as needed.

ITEM 10. Amend rule 321—21.12(231) as follows:

321—21.12(231) Service plan development.

~~21.12(1) During the home visit and upon~~ Upon completion of the comprehensive assessment during the home visit, the case manager shall develop an initial service plan with the ~~client~~ consumer which, at a minimum, shall take into consideration and address information identified during the assessment of the consumer's service needs, functioning level, strengths and available family or informal service providers and community resources. ~~and~~ The case manager shall provide the ~~client~~ consumer with a list of known service providers available in the client's consumer's community.

~~21.12(2)~~ Following the initial plan, a more thorough, ongoing plan shall be developed. The completed written service plan shall include at a minimum:

~~a. Identification of the client's service needs, functioning level, strengths and available family or informal service providers and community resources;~~

~~b a. Level A description of the level of care;~~

~~e b. Goals to be obtained by the consumer;~~

~~d c. Outcomes Expected outcomes;~~

~~e d. Waiver service Services to be provided, providers of those services and the frequency and cost of services, if available, and;~~

~~f. Nonwaiver services; and~~

~~g e. Exit and contingency planning.~~

21.12(3) The case manager shall ~~educate the client about service options and~~ explain to the ~~client~~ consumer how to access assistance in situations of suspected dependent adult abuse.

21.12(4) The ~~client~~ consumer or the ~~client's~~ consumer's legal representative and the case manager shall sign the service plan.

21.12(5) ~~The CMPFE coordinator shall review and sign the service plan~~ Each AAA shall have a written process in place to ensure that service plans meet all applicable standards.

21.12(6) ~~For clients who are enrolled in the medical assistance elderly waiver, the service plan shall be transmitted to the DHS service worker for final approval.~~

ITEM 11. Amend subrule 21.16(3) as follows:

21.16(3) The following ~~safeguards~~ requirements shall be in place to ensure that service plan development is conducted in the best interest of the ~~client~~ consumer:

a. When assigning a ~~client~~ consumer to a case management entity under contract, the AAA shall ~~attempt~~ make all reasonable efforts to assign the ~~client~~ consumer to an agency not currently providing direct services to that particular ~~client~~ consumer if the relationship is known prior to assignment

~~and case management services are available from multiple providers~~ consumer in an effort to avoid potential conflicts of interest.

b. ~~During the service plan development process, If the case managers manager is employed by an the same agency that also provides other direct waiver services to the consumer, the case manager shall inform discuss with the client consumer or the client's consumer's legal representative that such a relationship exists and of the specifics of the relationship such as name and services~~ the issue of potential conflict of interest. The case manager shall ~~emphasize to inform~~ the ~~client consumer~~ that the ~~client consumer~~ has free choice of providers and that selection of any particular provider will not influence the services provided by the case manager. The conversation and the ~~client's consumer's~~ response shall be documented in the case notes.

c. When explaining provider options, the case manager ~~shall fully provide all known facts about the services and the service provider agencies to the client or the client's legal representative. The details presented~~ shall include, at a minimum, the name, address, and telephone number of the potential provider agencies; the types of services provided; and the ~~amount~~ frequency and units of service the ~~client consumer~~ would be able to receive if there is a cost differential between providers of the same service.

d. ~~All service plans and updates shall be reviewed and approved by the AAA prior to implementation for nonwaiver clients and prior to transmittal to DHS for elderly waiver clients.~~

ITEM 12. Amend 321—Chapter 21 by adding the following **new** rule:
321—21.17(231) Severability. **Should any rule, subrule, paragraph, phrase, sentence or clause of this chapter be declared invalid or unconstitutional for any reason, the remainder**

of this chapter shall not be affected thereby.

John McCalley, Director

Date